Parent or Caregiver Information Sheet

Parents worry when their children's ears hurt. But, not every child with an earache needs an antibiotic. In fact, many children who have earaches get better without an antibiotic. The New York State Health Department wants antibiotics to be taken only by children who would benefit the most from them. Ask your child's doctor if your child really would benefit from an antibiotic.

What happens when children are given antibiotics that are not really needed?

Doctors use antibiotics to kill germs. But, sometimes, the germs are strong enough to resist the antibiotic. Then, each time your child takes an antibiotic, more germs may live. Eventually, the antibiotic stops working for your child. When this happens, the germs may spread to other family members, neighbors and playmates. Also, when a child is given antibiotics too often, he or she may get a rash, diarrhea, upset stomach, yeast infections, or other problems. If given antibiotics when they are not needed, the child may not respond to them when needed for a more serious infection, such as pneumonia or meningitis.

Do antibiotics help all children who have ear infections?

Doctors often give antibiotics to treat infections in the middle ear. About eight out of ten children with ear infections get better with no antibiotics at all. If your child has an earache, remember that antibiotics do not relieve pain during the first 24 hours and do not reduce fever any quicker or better than pain medicines. They also do not protect children from getting more ear infections. Your doctor will prescribe an antibiotic for your child if it is needed.

If antibiotics only help a few children, why use them?

Antibiotics work best for children who are under the age of two, or for older children who have really bad ear infections. Before antibiotics were discovered, children with really bad ear infections often became even sicker.

Which children should be given antibiotics? Which should not?

Your doctor will talk to you about your child. Antibiotics may be right for infants and very young children who have infections, not just fluid in their ears. They may also be right if a child is very sick or has a high fever. If the child is older and not very sick, or if the doctor is not sure if it is a real ear infection, it may be better to use a non-aspirin pain reliever (ACETAMINOPHEN or IBUPROFEN) for pain, and to wait and watch for up to 72 hours. If the child is still sick after 72 hours, the doctor will recheck the child and probably give an antibiotic. Never give your child an antibiotic that was not prescribed for him or her. Never share antibiotics with others. Make sure your child is given an antibiotic only for a true ear infection, not just fluid alone.

How long should a child take an antibiotic?

Antibiotic treatment of five, seven and ten days is effective. Antibiotic resistance occurs less often with a five-day treatment. Ask your doctor what is best for your child. Be sure to give your child all the full dosage of the antibiotic even if your child appears to feel better.

You can learn more about the proper use of antibiotics from the American Academy of Pediatrics. Visit their website at www.aap.org.